

United States Bankruptcy Court Eastern District of Wisconsin

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Daniels, Lee C. , II				Name of Joint Debtor (Spouse) (Last, First, Middle): Daniels, Tammy M.			
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): None				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): None			
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 5301				Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 1692			
Street Address of Debtor (No. and Street, City, and State) 229 Irene St. Green Bay, WI				Street Address of Joint Debtor (No. and Street, City, and State) 2257 S. Overland Dr. DePere, WI			
ZIPCODE 54302				ZIPCODE 54115			
County of Residence or of the Principal Place of Business: Brown				County of Residence or of the Principal Place of Business: Brown			
Mailing Address of Debtor (if different from street address): PO Box 5426 DePere, WI				Mailing Address of Joint Debtor (if different from street address):			
ZIPCODE 54115				ZIPCODE			
Location of Principal Assets of Business Debtor (if different from street address above):							ZIPCODE
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input checked="" type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other N.A.		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding			
Chapter 15 Debtors Country of debtor's center of main interests: _____ Each country in which a foreign proceeding by, regarding, or against debtor is pending: _____		Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)		Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. §101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.			
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (<i>amount subject to adjustment on 4/01/16 and every three years thereafter</i>). Check all applicable boxes <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).			
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.							THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000							
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion							
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion							

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Lee C. Daniels, II & Tammy M. Daniels

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)Location
Where Filed: NONE

Case Number:

Date Filed:

Location
Where Filed: N.A.

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor: NONE

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).

X /s/ John A. Foscatto
Signature of Attorney for Debtor(s)

03/10/2015
Date

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**
(Check any applicable box)☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.**Certification by a Debtor Who Resides as a Tenant of Residential Property**
(Check all applicable boxes)☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)_____
(Name of landlord that obtained judgment)_____
(Address of landlord)☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Voluntary Petition*(This page must be completed and filed in every case)*

Name of Debtor(s):

Lee C. Daniels, II & Tammy M. Daniels

Signatures**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Lee C. Daniels, II

Signature of Debtor

X /s/ Tammy M. Daniels

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

03/10/2015

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 of title 11 are attached.



Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

(Date)

Signature of Attorney*X /s/ John A. Foscatto

Signature of Attorney for Debtor(s)

JOHN A. FOSCATTO 1018196

Printed Name of Attorney for Debtor(s)

Law Offices of John A. Foscatto SC

Firm Name

P.O. Box 1133

Address

Green Bay, WI 54305-1133920-432-8801

Telephone Number

03/10/2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT
Eastern District of Wisconsin

In re Lee C. Daniels, II & Tammy M. Daniels
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☐ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☒ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Lee C. Daniels, II
LEE C. DANIELS, II

Date: 03/10/2015

UNITED STATES BANKRUPTCY COURT
Eastern District of Wisconsin

In re Lee C. Daniels, II & Tammy M. Daniels
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

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Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☐ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☒ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Joint Debtor: /s/ Tammy M. Daniels
TAMMY M. DANIELS

Date: 03/10/2015

United States Bankruptcy Court

Eastern District of Wisconsin

In re Lee C. Daniels, II & Tammy M. Daniels
Debtor

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 162,900.00		
B – Personal Property	YES	3	\$ 15,259.00		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	2		\$ 350,042.03	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	3		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	15		\$ 253,613.05	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 2,712.98
J - Current Expenditures of Individual Debtors(s)	YES	3			\$ 2,883.70
TOTAL		32	\$ 178,159.00	\$ 603,655.08	

United States Bankruptcy Court

Eastern District of Wisconsin

In re Lee C. Daniels, II & Tammy M. Daniels
Debtor

Case No. _____

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the Following:

Average Income (from Schedule I, Line 12)	\$ 2,712.98
Average Expenses (from Schedule J, Line 22)	\$ 2,883.70
Current Monthly Income (from Form 22A-1 Line 11; OR , Form 22B Line 14; OR , Form 22C-1 Line 14)	\$ 4,149.09

State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 196,046.40
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 253,613.05
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 449,659.45

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or in part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

In re Lee C. Daniels, II & Tammy M. Daniels

Debtor

Case No. _____

(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Single family residence; secured with \$22,600.00 equity 2257 S. Overland Dr. DePere, WI 54115	Fee Simple	W	162,900.00	140,300.00
Total >			162,900.00	

(Report also on Summary of Schedules.)

In re Lee C. Daniels, II & Tammy M. Daniels

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H U S B A N D, W I F E, J O I N T O R C O M M U N I T Y	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash residence	J	45.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account Community 1st CU	J	50.00
		Savings Account Community 1st CU	J	69.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Furniture residence	J	300.00
		Appliances residence	J	125.00
		Electronics residence	J	150.00
		Small Appliances / Cookware / Dishware residence	J	70.00
5. Books, Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.				

In re Lee C. Daniels, II & Tammy M. Daniels
DebtorCase No. _____
(If known)**SCHEDULE B - PERSONAL PROPERTY**
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
		Clothing; lump sum residence	J	250.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			

In re Lee C. Daniels, II & Tammy M. Daniels

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2009 Chevrolet HHR; secured with \$504.37 equity residence	J	6,700.00
		2005 Dodge Caravan & 2008 Honda Goldwing; fully secured by child support liens residence	J	7,500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
0 continuation sheets attached Total				\$ 15,259.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Lee C. Daniels, II & Tammy M. Daniels

Case No. _____

Debtor

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☒ 11 U.S.C. § 522(b)(2)☐ Check if debtor claims a homestead exemption that exceeds \$155,675*.☐ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Single family residence; secured with \$22,600.00 equity	11 U.S.C. 522(d)(1)	22,600.00	162,900.00
2009 Chevrolet HHR; secured with \$504.37 equity	11 U.S.C. 522(d)(5)	504.37	6,700.00
Cash	11 U.S.C. 522(d)(5)	45.00	45.00
Checking Account	11 U.S.C. 522(d)(5)	50.00	50.00
Savings Account	11 U.S.C. 522(d)(5)	69.00	69.00
Furniture	11 U.S.C. 522(d)(3)	300.00	300.00
Appliances	11 U.S.C. 522(d)(3)	125.00	125.00
Electronics	11 U.S.C. 522(d)(3)	150.00	150.00
Small Appliances / Cookware / Dishware	11 U.S.C. 522(d)(3)	70.00	70.00
Clothing; lump sum	11 U.S.C. 522(d)(3)	250.00	250.00

*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6D (Official Form 6D) (12/07)

In re Lee C. Daniels, II & Tammy M. Daniels,
Debtor

Case No. _____
(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.							
BMO Harris PO Box 365 Arlington Heights, IL 60006	J	Lien: 2nd Mortgage Security: 2257 S. Overland Rd. DePere, WI 54115				4,300.00	0.00
		VALUE \$ 162,900.00					
ACCOUNT NO.							
Community 1st Credit Union 1700 Lawrence Dr. DePere, WI 54115	J	Lien: Title Lien Security: 2009 Chevrolet HHR				6,195.63	0.00
		VALUE \$ 6,700.00					
ACCOUNT NO.							
CSC Iowa PO Box 9125 Des Moines, IA 50306-9125	J	Lien: Child support liens Security: 2005 Dodge Caravan & 2008 Honda Goldwing				52,522.40	45,022.40
		VALUE \$ 7,500.00					

1 continuation sheets attached

Subtotal > (Total of this page)	\$ 63,018.03	\$ 45,022.40
Total > (Use only on last page)	\$	\$

(Report also on
Summary of Schedules)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.		Incurred: 2010 Lien: Tax Lien			
Internal Revenue Service United States Treasury PO Box 7346 Philadelphia, PA 19101-7346	H			48,304.00	48,304.00
		VALUE \$ 0.00			
ACCOUNT NO.		Incurred: 2005 Lien: Tax Lien			
Internal Revenue Service United States Treasury PO Box 7346 Philadelphia, PA 19101-7346	H			57,052.00	57,052.00
		VALUE \$ 0.00			
ACCOUNT NO.		Incurred: 2004 Lien: Tax Lien			
Internal Revenue Service United States Treasury PO Box 7346 Philadelphia, PA 19101-7346	H			33,342.00	33,342.00
		VALUE \$ 0.00			
ACCOUNT NO.		Lien: 1st Mortgage Security: 2257 N. Overland Rd., DePere, WI 54115			
USDA Rural Development PO Box 790170 St. Louis, MO 63179	J			136,000.00	0.00
		VALUE \$ 162,900.00			
ACCOUNT NO.		Incurred: 2007 Lien: Tax Lien			
WI Dept of Revenue Special Procedures Unit PO Box 8901 Madison, WI 53708-8901	H			12,326.00	12,326.00
		VALUE \$ 0.00			
Subtotal (s) >				\$ 287,024.00	\$ 151,024.00
(Total(s) of this page)				\$ 350,042.03	\$ 196,046.40
(Use only on last page)					

Sheet no. 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Secured Claims(Report also on
Summary of Schedules)
(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

In re Lee C. Daniels, II & Tammy M. Daniels
DebtorCase No. _____
(if known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☒ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

B6E (Official Form 6E) (04/13) - Cont.

In re Lee C. Daniels, II & Tammy M. Daniels,
Debtor

Case No. _____
(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

(Continuation Sheet) Sec. 507(a)(1)

Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO.								
Karla Thomas c/o CSC Iowa PO Box 9125 Des Moines, IA 50306-9125	H	Consideration: Child support				Notice Only	Notice Only	Notice Only
ACCOUNT NO.								
Olivia Snow c/o CSC Iowa PO Box 9125 Des Moines, IA 50306-9125	H	Consideration: Child support				Notice Only	Notice Only	Notice Only
ACCOUNT NO.								
ACCOUNT NO.								

Sheet no. 1 of 1 continuation sheets attached to Schedule of
Creditors Holding Priority ClaimsSubtotal >
(Totals of this page)

\$ 0.00 \$ 0.00 \$ 0.00

Total >
(Use only on last page of the completed
Schedule E.) Report also on the Summary
of Schedules)

\$ 0.00

Totals >
(Use only on last page of the completed
Schedule E. If applicable, report also on
the Statistical Summary of Certain
Liabilities and Related Data.)

\$ 0.00 \$ 0.00

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. AFNI Inc. PO Box 3097 Bloomington, IL 61702-3097	J					316.00
ACCOUNT NO. American General Finance 600 N. Royall Ave. Evansville, IN 47715	J	Consideration: 09 CV 1521				8,457.00
ACCOUNT NO. Americollect PO Box 1566 Manitowoc, WI 54221	J	Consideration: Collection for Aurora Health Care				Notice Only
ACCOUNT NO. Andrew Daniels USS EIROD FFG 55 FPO, AE 09568-1509	J	Consideration: personal loan				40,000.00
Subtotal >						\$ 48,773.00
Total >						\$

14 continuation sheets attached

(Use only on last page of the completed Schedule F.)

(Report also on Summary of Schedules and, if applicable, on the Statistical

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.	J	Consideration: Collection for Theda Clark Medical Center				Notice Only
Attorney Christopher Evenson 303 S Memorial Drive Appleton, WI 54911-5978						
ACCOUNT NO.	J	Consideration: Collection for Robert Hatch				Notice Only
Atty. Daniel M. Muza 217 Ceape Avenue Oshkosh, WI 54901						
ACCOUNT NO.	J	Consideration: Additional notice				Notice Only
Aurora Health Care PO Box 091700 Milwaukee, WI 53209-8700						
ACCOUNT NO. 907671	J	Consideration: Medical services				696.80
Aurora Health Care PO Box 809418 Chicago, IL 60680-9418						
ACCOUNT NO. various	J	Consideration: Medical Services				1,121.00
Aurora Medical Group PO Box 341457 Milwaukee, WI 53234-1457						

Sheet no. 1 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 1,817.80

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. various Baycare Health Systems PO Box 28900 Green Bay, WI 54324	J	Consideration: Medical Services				303.00
ACCOUNT NO. ending in 8569 Best Buy / Citibank c/o Estate Info. Svcs LLC dba EIS Collections PO Box 1730 Reynoldsburg, OH 43068-8730	J	Consideration: Consumer Credit Card Purchases				2,070.05
ACCOUNT NO. 6035350235658569 Best Buy Credit Services PO Box 790441 St. Louis, MO 63179	J	Consideration: Consumer Credit Card Purchases				1,472.44
ACCOUNT NO. 4862369428082794 Capital One Services PO Box 30285 SLC, UT 84130-0285	J	Consideration: Consumer Credit Card Purchases				2,317.70
ACCOUNT NO. 4862362441393116 Capital One Services PO Box 30285 SLC, UT 84130-0285	J	Consideration: Consumer Credit Card Purchases				624.92
Sheet no. <u>2</u> of <u>14</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$ 6,788.11 Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4862369814152581 Capital One Services PO Box 30285 SLC, UT 84130-0285	J	Consideration: Consumer Credit Card Purchases				552.14
ACCOUNT NO. 175409003 Comenity - Brylane Home PO Box 659728 San Antonio, TX 78265-9728	J	Consideration: Consumer Credit Card Purchases				421.95
ACCOUNT NO. 6004668054656217 Comenity - Fashion Bug PO Box 659728 San Antonio, TX 78265-9728	J	Consideration: Consumer Credit Card Purchases				373.42
ACCOUNT NO. Comenity - Younkers Attn: Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125	J	Consideration: Additional notice				Notice Only
ACCOUNT NO. 2117500006149145 Comenity - Younkers PO Box 659813 San Antonio, TX 78265-9113	J	Consideration: Consumer Credit Card Purchases				817.67

Sheet no. 3 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 2,165.18

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. ending in 2148 Community First CU Customer Service PO Box 31112 Tampa, FL 33631-3112	J	Consideration: Consumer Credit Card Purchases				6,096.05
ACCOUNT NO. Community First CU PO Box 1487 Appleton, WI 54912-1487	J	Consideration: Additoinal notice				Notice Only
ACCOUNT NO. Consumer Adjustment Company 12855 Tesson Ferry Rd. Ste. 200 St. Louis, MO 63128-2912	J	Consideration: Collection for Mid American Energy				Notice Only
ACCOUNT NO. Consumer Collection Mgmt PO Box 1839 Maryland Heights, MO 63043	J	Consideration: Collection for St. Mary's Hospital				Notice Only
ACCOUNT NO. Credit Protection 13355 Noel Road #2100 Dallas, TX 75240	J	Consideration: Collection for Mediacom				Notice Only
Subtotal >						\$ 6,096.05
Total >						\$

Sheet no. 4 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. Dempsey Law Firm LLP PO Box 886 Oshkosh, WI 54903-0886	J	Consideration: Legal services				658.16	
ACCOUNT NO. Estate Information Services LLC dba EIS Collections PO Box 1730 Reynoldsburg, OH 43068-8730	J	Consideration: Collection for Best Buy/Citibank				Notice Only	
ACCOUNT NO. Finance Systems of GB PO Box 1597 Green Bay, WI 54305-1595	J	Consideration: Collection for Baycare Health Systems, Green Bay Radiology				Notice Only	
ACCOUNT NO. 2813** Green Bay Radiology, SC 2941 S Ridge Rd Green Bay, WI 54304	J	Consideration: Medical Services				55.00	
ACCOUNT NO. H & R Accounts Inc. 7017 John Deere Pkwy Moline, IL 61265-8072	J	Consideration: Collection for Interstate Power Alliant Energy				Notice Only	
Sheet no. <u>5</u> of <u>14</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >	\$ 713.16
						Total >	\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Hawkeye Auto Body c/o IC Systems PO Box 64378 St. Paul, MN 55164	J					353.00
ACCOUNT NO. 6019170236062409 HH Gregg / GE Capital Retail Bank Attn: Bankruptcy Dept. PO Box 965061 Orlando, FL 32896-5061	J	Consideration: Collection for Ameritech Inc				3,452.00
ACCOUNT NO. 6035320370123851 Home Depot Credit Services PO Box 790328 St. Louis, MO 63179	J	Consideration: Consumer Credit Card Purchases				2,202.10
ACCOUNT NO. 6035320494159641 Home Depot Credit Services PO Box 790328 St. Louis, MO 63179	J	Consideration: Consumer Credit Card Purchases				14,917.70
ACCOUNT NO. IC Systems PO Box 64378 St. Paul, MN 55164	J	Consideration: Collection for Hawkeye Auto Body				Notice Only

Sheet no. 6 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 20,924.80

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 17405346 Infinity Healthcare Physicians SC 111 E. Wisconsin Ave. Ste. 2000 Milwaukee, WI 53202-4809	J	Consideration: Medical Services				467.00
ACCOUNT NO. Internal Revenue Service United States Treasury PO Box 7346 Philadelphia, PA 19101-7346	J	Incurred: 2002-2011 Consideration: Income Taxes				81,553.78
ACCOUNT NO. Interpersonal Therapy LLC PO Box 544 Egg Harbor, WI 54209	J	Consideration: Medical Services				746.05
ACCOUNT NO. Interstate Power Alliant Energy c/o H & R Accounts Inc. 7017 John Deere Pkwy Moline, IL 61265-8072	J	Consideration: Utilities				67.00
ACCOUNT NO. Jeff & Tina Gross 1806 Trotter Ct. DePere, WI 54115	J	Consideration: personal loan				5,000.00

Sheet no. 7 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 87,833.83

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Kia Motor Finance PO Box 20825 Fountain Valley, CA 92728	J	Consideration: Vehicle lease				15,800.00
ACCOUNT NO. 0586618878 Kohls PO Box 2983 Milwaukee, WI 53201-2983	J	Consideration: Consumer Credit Card Purchases				1,055.55
ACCOUNT NO. Kohn Law Firm 735 N. Water St. Ste. 1300 Milwaukee, WI 53202-4106	J	Consideration: Collection for Capital One Bank				Notice Only
ACCOUNT NO. Kris & Cindy Stolpa 3608 Glen Kent Ct. Suamico, WI 54173	J	Consideration: personal loan				10,000.00
ACCOUNT NO. Marvin B. & Patricia Biese 6838 Cty Rd. D Greenleaf, WI 54126	J	Consideration: 15 SC 1130				8,000.00

Sheet no. 8 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 34,855.55

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. 128952**** Mediacom c/o Credit Protection 13355 Noel Road #2100 Dallas, TX 75240	J	Consideration: Utilities				156.00	
ACCOUNT NO. Merry Maids 2309 Woodale Ave. Green Bay, WI 54313	J					300.00	
ACCOUNT NO. Mid American Energy c/o Consumer Adjustment Company 12855 Tesson Ferry Rd. Ste. 200 St. Louis, MO 63128-2912	J	Consideration: Utilities				936.00	
ACCOUNT NO. Nationwide Credit Corp. PO Box 9156 Alexandria, VA 22304-0156	J	Consideration: Collection for Infinity Healthcare Phys				Notice Only	
ACCOUNT NO. Northland Group PO Box 390905 Edina, MN 55439	J	Consideration: Collection for Citibank/Home Depot				Notice Only	
Sheet no. <u>9</u> of <u>14</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >	\$ 1,392.00
						Total >	\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. NTL Credit Systems 117 E 24th St. New York, NY 10010	J	Consideration: Collection for US Claims				Notice Only
ACCOUNT NO. Pendrick Capital Partners c/o Virtuoso Sourcing Group 3033 S. Parker Rd. Ste 100 Aurora, CO 80014	J	Consideration: Medical services				261.00
ACCOUNT NO. Professional Placement 272 N 12th St. Milwaukee, WI 53233	J	Consideration: Collection for Winnebago County				Notice Only
ACCOUNT NO. Robert L. Hatch PO Box 108 Oshkosh, WI 54903-0108	J	Incurred: 2008 Consideration: 08 SC 4125				750.00
ACCOUNT NO. 17418 RPG SC 1325 Angels Path DePere, WI 54115-4050	J	Consideration: Medical services				745.00
Subtotal >						\$ 1,756.00
Total >						\$

Sheet no. 10 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 110771201 Sheffield Financial PO Box 580229 Charlotte, NC 28258-0229	J	Consideration: personal loan				2,792.96
ACCOUNT NO. 608217500818**** Springleaf formerly AGF 600 N. Royal Ave. Evansville, IN 47715-2612	J	Consideration: personal loan				4,070.00
ACCOUNT NO. 608244604506**** Springleaf formerly AGF 600 N. Royal Ave. Evansville, IN 47715-2612	J	Consideration: personal loan				5,451.00
ACCOUNT NO. St. Mary's Hospital 1726 Shawano Ave Green Bay, WI 54303	J	Consideration: Medical services				640.00
ACCOUNT NO. State Collections 2509 S. Stoughton Rd. Madison, WI 53716	J	Consideration: Collection for WPL Company dba Alliant Energy, Aurora Medical Group Inc.				Notice Only

Sheet no. 11 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 12,953.96

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 603532049415xxxx The Home Depot CCS Gray Ops Center PO Box 6497 Sioux Falls, SD 57117-6497	J	Consideration: Additional notice				Notice Only
ACCOUNT NO. Theda Clark Medical Center 130 2nd Street Neenah, WI 54956	J	Incurred: 2009 Consideration: 09 CV 1877				5,003.00
ACCOUNT NO. Twohig, Rietbrock, Schneider & Halbach PO Box 188 Chilton, WI 53014	J	Consideration: Collection for Marvin & Patricia Biese				Notice Only
ACCOUNT NO. US Claims c/o NTL Credit Systems 117 E 24th St. New York, NY 10010	J					282.00
ACCOUNT NO. VanDrisse Chiropractic Center LLC 502 George St. DePere, WI 54115	J	Consideration: Medical services				40.85

Sheet no. 12 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 5,325.85

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. Virtuoso Sourcing Group 3033 S. Parker Rd. Ste 100 Aurora, CO 80014	J	Consideration: Collection for Pendrick Capital Partners				Notice Only	
ACCOUNT NO. 5239141030288611 Walmart / Synchrony Bank Attn: Bankruptcy Dept. PO Box 965060 Orlando, FL 32896-5060	J	Consideration: Consumer Credit Card Purchases				5,320.76	
ACCOUNT NO. 51594004**** Wells Fargo Dealer Services / Wachovia PO Box 1697 Winterville, NC 28590	J	Consideration: Installment loan				11,872.00	
ACCOUNT NO. 5774421756062387 Wells Fargo Financial National Bank PO Box 660431 Dallas, TX 75266-0431	J	Consideration: Consumer Credit Card Purchases				2,525.00	
ACCOUNT NO. Winnebago County c/o Professional Placement 272 N 12th St. Milwaukee, WI 53233	J					940.00	
Sheet no. <u>13</u> of <u>14</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >	\$ 20,657.76
						Total >	\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.		Consideration: Damages				
Wisconsin Public Service PO Box 19003 Green Bay, WI 54307-9003	J					1,000.00
ACCOUNT NO. 68453**		Consideration: Utilities				
WPL Company dba Alliant Energy c/o State Collections 2509 S. Stoughton Rd. Madison, WI 53716	J					560.00
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
Subtotal >>						\$ 1,560.00
Total >>						\$ 253,613.05

Sheet no. 14 of 14 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Lee C. Daniels, II & Tammy M. Daniels

Case No. _____

Debtor

(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Curves 1705 S. Webster Ave. Green Bay, WI 54301	1 year contract
Hughes Net 11717 Exploration Ln. Germantown, MD 20876	2 year contract
Kia Motor Finance PO Box 20825 Fountain Valley, CA 92728	Closed end vehicle lease; to be rejected

In re Lee C. Daniels, II & Tammy M. Daniels

Debtor

Case No. _____

(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1 Lee C. Daniels, II
First Name Middle Name Last Name

Debtor 2 Tammy M. Daniels
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of WI

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY _____

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

☐ Employed
☒ Not employed

Occupation

Unemployed

Employer's name

Employer's address

Number Street

City State ZIP Code

How long employed there? _____

Debtor 2 or non-filing spouse

☒ Employed
☐ Not employed

Payroll Specialist

City of Green Bay

Green Bay, WI

Number Street

Green Bay, WI

City State ZIP Code

6 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$ 0.00

\$ 3,530.80

3. + \$ 0.00

+ \$ 430.32

4. \$ 0.00

\$ 3,961.12

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	\$ 0.00	\$ 3,961.12
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 676.06
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 572.08
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: ;	5h. + \$ 0.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 0.00	\$ 1,248.14
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 2,712.98
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: ;	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: ;	8h. + \$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 0.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 0.00	\$ 2,712.98
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: ;		11. + \$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		12. \$ 2,712.98 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: ;		

Fill in this information to identify your case:

Debtor 1 Lee C. Daniels, II
First Name Middle Name Last Name

Debtor 2 Tammy M. Daniels
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of WI

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J**Schedule J: Your Expenses**

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

- ☐ No. Go to line 2.
- ☒ Yes. **Does Debtor 2 live in a separate household?**
- ☐ No
- ☒ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

son

15 years

☐ No☒ Yes☐ No☐ Yes☐ No☐ Yes☐ No☐ Yes☐ No☐ Yes**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 0.00

If not included in line 4:

4a. Real estate taxes	4a. \$ 0.00
4b. Property, homeowner's, or renter's insurance	4b. \$ 0.00
4c. Home maintenance, repair, and upkeep expenses	4c. \$ 0.00
4d. Homeowner's association or condominium dues	4d. \$ 0.00

		Your expenses	
5.	Additional mortgage payments for your residence , such as home equity loans	5.	\$ 0.00
6.	Utilities:		
6a.	Electricity, heat, natural gas	6a.	\$ 0.00
6b.	Water, sewer, garbage collection	6b.	\$ 0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 85.00
6d.	Other. Specify: _____	6d.	\$ 0.00
7.	Food and housekeeping supplies	7.	\$ 50.00
8.	Childcare and children's education costs	8.	\$ 0.00
9.	Clothing, laundry, and dry cleaning	9.	\$ 0.00
10.	Personal care products and services	10.	\$ 0.00
11.	Medical and dental expenses	11.	\$ 85.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$ 30.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ 0.00
14.	Charitable contributions and religious donations	14.	\$ 0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	\$ 95.00
15b.	Health insurance	15b.	\$ 0.00
15c.	Vehicle insurance	15c.	\$ 0.00
15d.	Other insurance. Specify: _____	15d.	\$ 0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$ 0.00
17.	Installment or lease payments:		
17a.	Car payments for Vehicle 1	17a.	\$ 0.00
17b.	Car payments for Vehicle 2	17b.	\$ 0.00
17c.	Other. Specify: _____	17c.	\$ 0.00
17d.	Other. Specify: _____	17d.	\$ 0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	\$ 80.00
19.	Other payments you make to support others who do not live with you. Specify: _____	19.	\$ 0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a.	Mortgages on other property	20a.	\$ 0.00
20b.	Real estate taxes	20b.	\$ 0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$ 0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$ 0.00
20e.	Homeowner's association or condominium dues	20e.	\$ 0.00

Debtor 1 Lee C. Daniels, II
First Name Middle Name Last Name

Case number (if known) _____

21. **Other.** Specify: _____ 21. **+\$** 0.00

22. **Your monthly expenses.** Add lines 4 through 21. (*Includes totals from Debtor 2) 22. **\$** 2,755.00 *
The result is your monthly expenses.

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*. 23a. **\$** 2,712.98

23b. Copy your monthly expenses from line 22 above. 23b. **-\$** 2,755.00

23c. Subtract your monthly expenses from your monthly income. 23c. **\$** -42.02
The result is your *monthly net income*.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 Lee C. Daniels, II
First Name Middle Name Last Name

Debtor 2 Tammy M. Daniels
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of WI

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date: _____
MM / DD / YYYY
- ☒ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J**Schedule J: Your Expenses**

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

- ☐ No. Go to line 2.
- ☒ Yes. **Does Debtor 2 live in a separate household?**
- ☐ No
- ☒ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2. Do not state the dependents' names.	<input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out this information for each dependent.....	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
See Debtor 1 Schedule J for Dependents				<input type="checkbox"/> No <input type="checkbox"/> Yes
				<input type="checkbox"/> No <input type="checkbox"/> Yes
				<input type="checkbox"/> No <input type="checkbox"/> Yes
				<input type="checkbox"/> No <input type="checkbox"/> Yes
				<input type="checkbox"/> No <input type="checkbox"/> Yes
				<input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses	
4.	\$ 950.00

If not included in line 4:

4a. Real estate taxes	4a. \$ 0.00
4b. Property, homeowner's, or renter's insurance	4b. \$ 0.00
4c. Home maintenance, repair, and upkeep expenses	4c. \$ 0.00
4d. Homeowner's association or condominium dues	4d. \$ 0.00

		Your expenses	
5.	Additional mortgage payments for your residence , such as home equity loans	5.	\$ 128.70
6.	Utilities:		
6a.	Electricity, heat, natural gas	6a.	\$ 150.00
6b.	Water, sewer, garbage collection	6b.	\$ 0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 290.00
6d.	Other. Specify: _____	6d.	\$ 0.00
7.	Food and housekeeping supplies	7.	\$ 300.00
8.	Childcare and children's education costs	8.	\$ 0.00
9.	Clothing, laundry, and dry cleaning	9.	\$ 50.00
10.	Personal care products and services	10.	\$ 50.00
11.	Medical and dental expenses	11.	\$ 50.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$ 200.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ 50.00
14.	Charitable contributions and religious donations	14.	\$ 0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	\$ 0.00
15b.	Health insurance	15b.	\$ 0.00
15c.	Vehicle insurance	15c.	\$ 95.00
15d.	Other insurance. Specify: _____	15d.	\$ 0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$ 0.00
17.	Installment or lease payments:		
17a.	Car payments for Vehicle 1	17a.	\$ 145.00
17b.	Car payments for Vehicle 2	17b.	\$ 0.00
17c.	Other. Specify: _____	17c.	\$ 0.00
17d.	Other. Specify: _____	17d.	\$ 0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	\$ 0.00
19.	Other payments you make to support others who do not live with you. Specify: _____	19.	\$ 0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a.	Mortgages on other property	20a.	\$ 0.00
20b.	Real estate taxes	20b.	\$ 0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$ 0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$ 0.00
20e.	Homeowner's association or condominium dues	20e.	\$ 0.00

21. **Other.** Specify: _____

21. +\$ 0.00

22. **Your monthly expenses.** Add lines 4 through 21.
The result is your monthly expenses.

22. \$ 2,458.70

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$(Included in Debtor 1)

23b. Copy your monthly expenses from line 22 above.

23b. -\$ (Included in Debtor 1)

23c. Subtract your monthly expenses from your monthly income.
The result is your *monthly net income*.

23c. \$(Included in Debtor 1)

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

B6 (Official Form 6 - Declaration) (12/07)

Lee C. Daniels, II & Tammy M. Daniels

In re

Debtor

Case No.

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 34 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 03/10/2015

Signature: /s/ Lee C. Daniels, II
Debtor

Date 03/10/2015

Signature: /s/ Tammy M. Daniels
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,
of Bankruptcy Petition Preparer

Social Security No.
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the _____ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the _____ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Signature: _____

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT

Eastern District of Wisconsin

In Re Lee C. Daniels, II & Tammy M. DanielsCase No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2015(db)	\$0	Unemployed
2014(db)	\$0	Unemployed
2013(db)	\$0	Unemployed
2015(jdb)	\$8,847.91	Employment
2014(jdb)	\$33,253.02	Employment less self employed net -\$848.33
2013(jdb)	\$70,305.00	Employment & self employed gross \$42,181.00 / net -\$10,664.00

2. Income other than from employment or operation of business

None



State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None



Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF
PAYMENTSAMOUNT
PAIDAMOUNT STILL
OWING

None



b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after date of adjustment.*

NAME AND ADDRESS OF CREDITOR
AND RELATIONSHIP TO DEBTORDATES OF
PAYMENTSAMOUNT
PAIDAMOUNT STILL
OWING

None



c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
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Tammy Daniels vs. Lee Daniels 14 FA 1127	Divorce	Circuit Court Brown County	Pending
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Marvin & Patricia Biese vs. Debtor 15 SC 1130	Small Claims	Circuit Court Brown County	Pending
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None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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5. Repossessions, foreclosures and returns

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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6. Assignments and Receiverships

None



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS OF
ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF
ASSIGNMENT
OR SETTLEMENT

None



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS OF
CUSTODIAN

NAME AND LOCATION
OF COURT CASE TITLE
& NUMBER

DATE OF
ORDER

DESCRIPTION AND
VALUE OF PROPERTY

7. Gifts

None



List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS OF
PERSON OR ORGANIZATION

RELATIONSHIP
TO DEBTOR, IF ANY

DATE OF
GIFT

DESCRIPTION AND
VALUE OF GIFT

8. Losses

None



List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION
AND VALUE
OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS
WAS COVERED IN WHOLE OR IN PART BY
INSURANCE, GIVE PARTICULARS

DATE OF
LOSS

9. Payments related to debt counseling or bankruptcy

None

☐

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
John A. Foscatto Law Offices of John A. Foscatto SC P.O. Box 1133 Green Bay, WI 54305-1133	10/6/14	\$1200.00

10. Other transfers

None

☒

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

☒

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

None

☒

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None



List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
------------------------------	--------------------------------------	----------------------

15. Prior address of debtor

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
835 Centennial Centre Blvd. #2 Hobart, WI 54155		8/1/14 - 12/15/14

16. Spouses and Former Spouses

None

☐

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Pam Daniels

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

☒

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

☒

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
--------------------------	--	-------------------	----------------------

- c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None
☒

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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18. Nature, location and name of business

None
☐

- a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
All Ways Builders	45-5306496	2257 S. Overland Rd. DePere, WI 54115	Flooring & Building	5/13 - 7/31/14

- b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None
☒

NAME	ADDRESS
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[Questions 19 - 25 are not applicable to this case]

* * * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	<u>03/10/2015</u>	Signature of Debtor	<u>/s/ Lee C. Daniels, II</u> <u>LEE C. DANIELS, II</u>
Date	<u>03/10/2015</u>	Signature of Joint Debtor	<u>/s/ Tammy M. Daniels</u> <u>TAMMY M. DANIELS</u>

0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X
Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT

Eastern District of Wisconsin

Lee C. Daniels, II & Tammy M. Daniels

In re _____,
DebtorCase No. _____
Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. *(Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)*

Property No. 1	
Creditor's Name: USDA Rural Development	Describe Property Securing Debt: Single family residence; secured with \$22,600.00 equity
Property will be <i>(check one)</i> : <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained </div> If retaining the property, I intend to <i>(check at least one)</i> : <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)). </div> Property is <i>(check one)</i> : <div style="display: flex; justify-content: space-around;"> <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt </div>	

Property No. 2 <i>(if necessary)</i>	
Creditor's Name: BMO Harris	Describe Property Securing Debt: Single family residence; secured with \$22,600.00 equity
Property will be <i>(check one)</i> : <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained </div> If retaining the property, I intend to <i>(check at least one)</i> : <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)). </div> Property is <i>(check one)</i> : <div style="display: flex; justify-content: space-around;"> <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt </div>	

PART B - Personal property subject to unexpired leases. *(All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)*

Property No. 1		
Lessor's Name: Kia Motor Finance PO Box 20825 Fountain Valley, CA 92728	Describe Leased Property: Closed end vehicle lease; to be rejected	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

Property No. 2 <i>(if necessary)</i>		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 3 <i>(if necessary)</i>		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

1 continuation sheets attached *(if any)*

I declare under penalty of perjury that the above indicates my intention as to any property of my Estate securing debt and/or personal property subject to an unexpired lease.

Date: 03/10/2015

/s/ Lee C. Daniels, II

Signature of Debtor

/s/ Tammy M. Daniels

Signature of Joint Debtor

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

(Continuation Sheet)

PART A - Continuation

Property No: 3	
Creditor's Name: Community 1st CU	Describe Property Securing Debt: 2009 Chevrolet HHR; secured with \$504.37 equity
<p>Property will be (check one):</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained </div> <p>If retaining the property, I intend to (check at least one):</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)). </div> <p>Property is (check one):</p> <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt </div>	

United States Bankruptcy Court
Eastern District of Wisconsin

In re Lee C. Daniels, II & Tammy M. Daniels
Debtor

Case No. _____
(If known)

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code

Printed name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X

Signature of Bankruptcy Petition Preparer or officer,
Principal, responsible person, or partner whose Social
Security number is provided above.

Certification of the Debtor

I, (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code

Lee C. Daniels, II & Tammy M. Daniels
Printed Names(s) of Debtor(s)

X /s/ Lee C. Daniels, II 03/10/2015
Signature of Debtor Date

Case No. (if known) _____

X /s/ Tammy M. Daniels 03/10/2015
Signature of Joint Debtor, (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 1,200.00

Prior to the filing of this statement I have received \$ 1,200.00

Balance Due \$ 0.00

2. The source of compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

03/10/2015

Date

/s/ John A. Foscatto

Signature of Attorney

Law Offices of John A. Foscatto SC

Name of law firm

Fill in this information to identify your case:

Debtor 1 Lee C. Daniels, II
First Name Middle Name Last Name

Debtor 2 Tammy M. Daniels
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of WI
(If known) (State)

Case number _____

Check one box only as directed in this form and in Form 22A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 22A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 22A-1

Chapter 7 Statement of Your Current Monthly Income

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 22A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☒ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 0.00	\$ 4,149.09
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm		
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	– \$ 0.00	
Net monthly income from a business, profession, or farm	\$ 0.00 Copy here →	\$ 0.00
6. Net income from rental and other real property		
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	– \$ 0.00	
Net monthly income from rental or other real property	\$ 0.00 Copy here →	\$ 0.00
7. Interest, dividends, and royalties	\$ 0.00	\$ 0.00

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
----------------------	--

8. Unemployment compensation

\$ 0.00	\$ 0.00
---------	---------

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \downarrow

For you \$ 0.00

For your spouse..... \$ 0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$ 0.00	\$ 0.00
---------	---------

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

10a. _____ \$ 0.00

10b. _____ \$ 0.00

10c. Total amounts from separate pages, if any.

\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00
+\$ 0.00	+\$ 0.00

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 0.00	+	\$ 4,149.09	=	\$ 4,149.09
Total current monthly income				

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11..... Copy line 11 here \rightarrow 12a. \$ 4,149.09

Multiply by 12 (the number of months in a year).

$\times 12$

12b. The result is your annual income for this part of the form. 12b. \$ 49,789.08

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Wisconsin

Fill in the number of people in your household.

2

Fill in the median family income for your state and size of household. 13. \$ 58,786.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 22A-2.* Go to Part 3 and fill out Form 22A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

\times /s/ Lee C. Daniels, II

Signature of Debtor 1

Date 03/10/2015
MM / DD / YYYY

\times /s/ Tammy M. Daniels

Signature of Debtor 2

Date 03/10/2015
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 22A-2.

If you checked line 14b, fill out Form 22A-2 and file it with this form.

Form 22 Continuation Sheet

Monthly Income

Month 1

Gross wages, salary, tips...	0.00	3,535.33
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 3

Gross wages, salary, tips...	0.00	5,813.10
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 5

Gross wages, salary, tips...	0.00	3,347.81
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 2

Gross wages, salary, tips...	0.00	5,312.58
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 4

Gross wages, salary, tips...	0.00	3,460.87
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Month 6

Gross wages, salary, tips...	0.00	3,424.86
Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00
Other Income...	0.00	0.00

Additional Items as Designated, if any

Remarks

AFNI Inc.
PO Box 3097
Bloomington, IL 61702-3097

American General Finance
600 N. Royall Ave.
Evansville, IN 47715

Americollect
PO Box 1566
Manitowoc, WI 54221

Andrew Daniels
USS EIROD FFG 55
FPO, AE 09568-1509

Attorney Christopher Evenson
303 S Memorial Drive
Appleton, WI 54911-5978

Atty. Daniel M. Muza
217 Ceape Avenue
Oshkosh, WI 54901

Aurora Health Care
PO Box 091700
Milwaukee, WI 53209-8700

Aurora Health Care
PO Box 809418
Chicago, IL 60680-9418

Aurora Medical Group
PO Box 341457
Milwaukee, WI 53234-1457

Baycare Health Systems
PO Box 28900
Green Bay, WI 54324

Best Buy / Citibank
c/o Estate Info. Svcs LLC dba EIS Collections
PO Box 1730
Reynoldsburg, OH 43068-8730

Best Buy Credit Services
PO Box 790441
St. Louis, MO 63179

BMO Harris
PO Box 365
Arlington Heights, IL 60006

Capital One Services
PO Box 30285
SLC, UT 84130-0285

Capital One Services
PO Box 30285
SLC, UT 84130-0285

Capital One Services
PO Box 30285
SLC, UT 84130-0285

Comenity - Brylane Home
PO Box 659728
San Antonio, TX 78265-9728

Comenity - Fashion Bug
PO Box 659728
San Antonio, TX 78265-9728

Comenity - Youngkers
Attn: Bankruptcy Dept.
PO Box 182125
Columbus, OH 43218-2125

Comenity - Youngkers
PO Box 659813
San Antonio, TX 78265-9113

Community 1st Credit Union
1700 Lawrence Dr.
DePere, WI 54115

Community First CU
Customer Service
PO Box 31112
Tampa, FL 33631-3112

Community First CU
PO Box 1487
Appleton, WI 54912-1487

Consumer Adjustment Company
12855 Tesson Ferry Rd. Ste. 200
St. Louis, MO 63128-2912

Consumer Collection Mgmt
PO Box 1839
Maryland Heights, MO 63043

Credit Protection
13355 Noel Road #2100
Dallas, TX 75240

CSC Iowa
PO Box 9125
Des Moines, IA 50306-9125

Curves
1705 S. Webster Ave.
Green Bay, WI 54301

Dempsey Law Firm LLP
PO Box 886
Oshkosh, WI 54903-0886

Estate Information Services LLC dba
EIS Collections
PO Box 1730
Reynoldsburg, OH 43068-8730

Finance Systems of GB
PO Box 1597
Green Bay, WI 54305-1595

Green Bay Radiology, SC
2941 S Ridge Rd
Green Bay, WI 54304

H & R Accounts Inc.
7017 John Deere Pkwy
Moline, IL 61265-8072

Hawkeye Auto Body
c/o IC Systems
PO Box 64378
St. Paul, MN 55164
HH Gregg / GE Capital Retail Bank
Attn: Bankruptcy Dept.
PO Box 965061
Orlando, FL 32896-5061

Home Depot Credit Services
PO Box 790328
St. Louis, MO 63179

Home Depot Credit Services
PO Box 790328
St. Louis, MO 63179

Hughes Net
11717 Exploration Ln.
Germantown, MD 20876

IC Systems
PO Box 64378
St. Paul, MN 55164

Infinity Healthcare Physicians SC
111 E. Wisconsin Ave. Ste. 2000
Milwaukee, WI 53202-4809

Internal Revenue Service
United States Treasury
PO Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service
United States Treasury
PO Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service
United States Treasury
PO Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service
United States Treasury
PO Box 7346
Philadelphia, PA 19101-7346

Interpersonal Therapy LLC
PO Box 544
Egg Harbor, WI 54209

Interstate Power Alliant Energy
c/o H & R Accounts Inc.
7017 John Deere Pkwy
Moline, IL 61265-8072

Jeff & Tina Gross
1806 Trotter Ct.
DePere, WI 54115

Karla Thomas
c/o CSC Iowa
PO Box 9125
Des Moines, IA 50306-9125

Kia Motor Finance
PO Box 20825
Fountain Valley, CA 92728

Kia Motor Finance
PO Box 20825
Fountain Valley, CA 92728

Kohls
PO Box 2983
Milwaukee, WI 53201-2983

Kohn Law Firm
735 N. Water St. Ste. 1300
Milwaukee, WI 53202-4106

Kris & Cindy Stolpa
3608 Glen Kent Ct.
Suamico, WI 54173

Marvin B. & Patricia Biese
6838 Cty Rd. D
Greenleaf, WI 54126

Mediacom
c/o Credit Protection
13355 Noel Road #2100
Dallas, TX 75240

Merry Maids
2309 Woodale Ave.
Green Bay, WI 54313

Mid American Energy
c/o Consumer Adjustment Company
12855 Tesson Ferry Rd. Ste. 200
St. Louis, MO 63128-2912

Nationwide Credit Corp.
PO Box 9156
Alexandria, VA 22304-0156

Northland Group
PO Box 390905
Edina, MN 55439

NTL Credit Systems
117 E 24th St.
New York, NY 10010

Olivia Snow
c/o CSC Iowa
PO Box 9125
Des Moines, IA 50306-9125

Pendrick Capital Partners
c/o Virtuoso Sourcing Group
3033 S. Parker Rd. Ste 100
Aurora, CO 80014

Professional Placement
272 N 12th St.
Milwaukee, WI 53233

Robert L. Hatch
PO Box 108
Oshkosh, WI 54903-0108

RPG SC
1325 Angels Path
DePere, WI 54115-4050

Sheffield Financial
PO Box 580229
Charlotte, NC 28258-0229

Springleaf formerly AGF
600 N. Royal Ave.
Evansville, IN 47715-2612

Springleaf formerly AGF
600 N. Royal Ave.
Evansville, IN 47715-2612

St. Mary's Hospital
1726 Shawano Ave
Green Bay, WI 54303

State Collections
2509 S. Stoughton Rd.
Madison, WI 53716

The Home Depot
CCS Gray Ops Center
PO Box 6497
Sioux Falls, SD 57117-6497

Theda Clark Medical Center
130 2nd Street
Neenah, WI 54956

Twohig, Rietbrock, Schneider & Halbach
PO Box 188
Chilton, WI 53014

US Claims
c/o NTL Credit Systems
117 E 24th St.
New York, NY 10010

USDA Rural Development
PO Box 790170
St. Louis, MO 63179

VanDrisse Chiropractic Center LLC
502 George St.
DePere, WI 54115

Virtuoso Sourcing Group
3033 S. Parker Rd. Ste 100
Aurora, CO 80014

Walmart / Synchrony Bank
Attn: Bankruptcy Dept.
PO Box 965060
Orlando, FL 32896-5060
Wells Fargo Dealer Services / Wachovia
PO Box 1697
Winterville, NC 28590

Wells Fargo Financial National Bank
PO Box 660431
Dallas, TX 75266-0431

WI Dept of Revenue
Special Procedures Unit
PO Box 8901
Madison, WI 53708-8901

Winnebago County
c/o Professional Placement
272 N 12th St.
Milwaukee, WI 53233

Wisconsin Public Service
PO Box 19003
Green Bay, WI 54307-9003

WPL Company dba Alliant Energy
c/o State Collections
2509 S. Stoughton Rd.
Madison, WI 53716

**UNITED STATES BANKRUPTCY COURT
Eastern District of Wisconsin**

In re Lee C. Daniels, II & Tammy M. Daniels ,
Debtor

Case No. _____

Chapter 7 _____

VERIFICATION OF LIST OF CREDITORS

I hereby certify under penalty of perjury that the attached List of Creditors which consists of 8 pages, is true, correct and complete to the best of my knowledge.

Date 03/10/2015 _____

Signature
of Debtor

/s/ Lee C. Daniels, II

LEE C. DANIELS, II

Date 03/10/2015 _____

Signature
of Joint Debtor

/s/ Tammy M. Daniels

TAMMY M. DANIELS

John A. Foscatto
Law Offices of John
A. Foscatto SC
P.O. Box 1133
Green Bay, WI 54305-1133
920-432-8801
920-432-8859